

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	438	5-27-44
TYPIST	359	6-7-44
VERIFIER	342	10-9
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final Original	
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SYMBOLS

✓ Rejected

— Allowed

(Through number) Cancelled

N Restricted

I Non-elected

A Interference

O Appeal

O Objected

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